BEST AVAILABLE COPY

								Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECO													
Effective October 1, 2001									50023-167					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER SMALL I				
TOTAL CLAIMS			40			RATE		RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE 370.00		OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			// minus 20=		* 21			X\$ 9=		OR	X\$18=	378		
INDEPENDENT CLAIMS			/ 5 mir	nus 3 =	12			X42=		OR	X84=	1008		
MUI	TIPLE DEPENI	DENT CLAIM PF	RESENT			Ø		+140=			+280=	280		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL			TOTAL	7406			
	CLAIMS AS AMENDED - PART II										OTHER			
-		(Column 1)		(Colu		(Column 3)		SMALL ENTITY			SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MOZ	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
AME	Independent	*	Minus	***		=	1 [X42=		OR	X84=			
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	T CLAIM		J	+140=		OR	+280=			
							L	TOTAL			TOTAL			
								DDIT. FEE		OR ADDIT. FEE				
		(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST			٠ -		i .==.							
MENT B		REMAINING AFTER AMENDMENT		NUM PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
AMEND	Independent	*	Minus	***	T OL A184]=	1 [X42=		OR	X84=			
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	II CLAIM		1	+140=		OR	+280=			
,							L	TOTAL		OR	TOTAL			
l .	ADDIT. FEE								<u></u>		ADDIT. FEE			
		(Column 1) CLAIMS	T		ımn 2) HEST	(Column 3)	1 -		LABBI			L ADDI		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUI PREV	MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
ME	Independent	*	Minus	***		=-	11	X42=		OR	X84=			
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM	1	1	+140=		1	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	TOTAL	<u> </u>				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

PATENT APPLICATION FEE DETERMINATION RECORD.

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1)						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							Г	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	minus 3 =		*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	Ļ	OTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART					TII		S	OIAE		Jon	OTHER	THAN	
(Column 1) (Column 2)						(Column 3)	S	MALL	ENTITY	OR	SMALL		
AMENDMENT A	7	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 4	Minus	** 2	//	= \$,	X\$ 9=		OR	X\$18≠		
	Independent	* / 5 INTATION OF MI	Minus	***	SIAIM	= /	;	X42=		OR	X84=		
	TINOT PRESE	INTATION OF MI	ULTIPLE DE	PENDENT	CLAIM	اللا	+	140=		OR	+280=		
							ADI	TOTAL DIT. FEE		OR,	TOTAL ADDIT. FEE	*	
						(Column 3)			•				
AMENDMENT B		CLAIMS REMAINING AFTER AMENŌMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		-	7	(42=		OR	X84= .	,	
	PHESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		1	140=		OR	+280=		
	•						Ŀ	TOTAL			TOTAL		
·		(Column 1)		(Colum	nn 2)	(Column 3)	ADL	OIT. FEE L	اليوسيون	··· /	ADDIT. FEE		
AMENDMENT C	4	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER USLY	PRESENT EXTRA	F	ATE	ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##			×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	###		=	X	(42=		OR	X84=	· · · · · ·	
긔	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM					ं			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									+280=				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEOR													
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FORM PTO-875 (Rev. 8/01)

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